

DOCKET NO.: PARK-4012

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Applicants: Alton F. Parker

Examiner: Lagman, Frederick

JUL 07 2005

Serial No.: 10/808,641

Art Unit: 3673

Filed: 03/25/04

For: DRAINAGE SUPPORT MATRIX

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

REQUEST FOR RECONSIDERATION

Sir:

In response to the Office Action mailed March 23, 2005, reconsideration and allowance are respectfully requested in view of the Amendments and Remarks below.

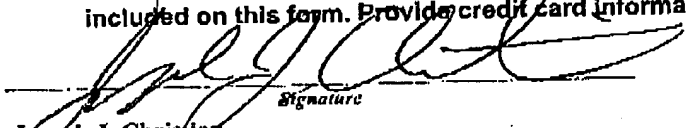
Serial No. 10/808,641

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PAGE 11/17 * RCVD AT 7/7/2005 1:40:00 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-1/6 * DNIS:8729306 * CSID: * DURATION (mm:ss):04:52

AMENDMENT TRANSMITTAL LETTER (Small Entity)					Docket No. PARK-4012	
Applicant(s): Alton F. Parker						
Application No. 10/808,641	Filing Date 03/25/2004	Examiner Lagman, Frederick	Customer No. 5409	Group Art Unit 3673	Confirmation No.	
Invention: DRAINAGE SUPPORT MATRIX						
COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application.						
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	32	20 =	12	x \$25.00	\$300.00	
INDEP. CLAIMS	12	3 =	9	x \$100.00	\$900.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$1,200.00	
<input type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. 19-0513 in the amount of \$1,200.00 <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-0513 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 Joseph J. Christian Reg. No. 51,560 Schmeiser, Olsen & Watts 3 Lear Jet Lane, Suite 201 Latham, NY 12110 (518) 220-1850			Dated: July 7, 2005 <div style="border: 1px solid black; padding: 5px;"> I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence </div>			
CC:						

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